

Attorney Docket No. \_\_\_\_\_

**COMBINED DECLARATION AND POWER OF ATTORNEY  
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Title: **Driving arrangements for active matrix LCDs**

the specification of which

(a) ☒ is attached hereto.

(b) ☒ was filed on August 30, 2001 as Serial No. 0 / or ☒ Express  
Mail No. EF232849068US as Serial No. not yet known, and was amended on \_\_\_\_\_ (if applicable).

(c) \_\_\_\_\_ was described and claimed in PCT International Application No. \_\_\_\_\_ filed on \_\_\_\_\_ and amended under  
PCT Article 34 on \_\_\_\_\_ (if any).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

**PRIORITY CLAIM**

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(d) \_\_\_\_\_ no such application have been filed.

(e) \_\_\_\_\_ such applications have been filed as follows.

**EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
<u>Great Britain</u>	<u>0021712.5</u>	<u>5/9/2000</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS  
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**POWER OF ATTORNEY**

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Armand P. Boisselle, Reg. No. 22,381; Neil A. DuChes, Reg. No. 26,725; Mark D. Saralino, Reg. No. 34,243

The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and

follow instruction from

Name(s) of authorized representation(s) Shusaku Yamamoto Patent Law Office

Address Fifteenth Floor, Crystal Tower, 1-2-27 Shiomi, Chujo-Ku, Osaka 540, Japan

as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned.

Send Correspondence To

Direct Telephone Calls To:  
(name and telephone number)

Neil A. DuChes  
RENNER, OTTO, BOISSELLE & SKLAR, LLP  
1621 Euclid Avenue, 19th Floor  
Cleveland, Ohio 44115

Neil A. DuChes  
(216) 621-1113

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.

Full name of second inventor, if any Michael James Brownlow

Inventor's signature [Signature]

Date 13 May 01 Country of Citizenship U.K.

Residence Oxford OX4 4YB, U.K.

Post Office Address 124 Church Road, Sandford on Thames, Oxford OX4 4YB, U.K.

Full name of sole or first inventor Graham Andrew Cairns

Inventor's signature [Signature]

Date 14 Dec 01 Country of Citizenship U.K.

Residence Oxford, OX2 8NH, U.K.

Post Office Address 22 Bourne Close, Cutteslowe, Oxford, OX2 8NH, U.K.

Full name of third inventor, if any

Inventor's signature

Date Country of Citizenship

Residence

Post Office Address

CHECK FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH  
FORM A PART OF THIS DECLARATION

Signature for fourth and subsequent joint inventors. Number of pages added 1

Added page to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.

☒ This declaration ends with this page.

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Address Fifteenth Floor, Crystal Tower, 1-2-27 Shiromi, Chuo-Ku, Osaka 540, Japan

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RENNER, OTTO, BOISSELLE & SKLAR, LLP  
1621 Euclid Avenue, 19th Floor  
Cleveland, Ohio 44115

Neil A. DuChez  
(216) 621-1113

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Full name of second inventor, if any Harry Garth Walton  
Inventor's signature [Signature]  
Date 28/8/2001 Country of Citizenship U.K.  
Residence Oxford OX4 3NE U.K.  
Post Office Address 45 Beauchamp Place, Beauchamp Lane, Cowley, Oxford OX4 3NE U.K.

Full name of sole or first inventor Andrew Kay  
Inventor's signature [Signature]  
Date 28/8/2001 Country of Citizenship U.K.  
Residence ~~99 Hurst Street, Oxford~~ Oxford, OX4 1HA UK.  
Post Office Address ~~99 Hurst Street, Oxford~~ 99 Hurst Street, Oxford OX4 1HA UK.

Full name of third inventor, if any \_\_\_\_\_  
Inventor's signature \_\_\_\_\_  
Date \_\_\_\_\_ Country of Citizenship \_\_\_\_\_  
Residence \_\_\_\_\_  
Post Office Address \_\_\_\_\_

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FORM A PART OF THIS DECLARATION

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